



McNees Wallace & Nurick LLC
attorneys at law

Routing #3005
Client #24324-0001

FAX COVER LETTER

DATE: July 24, 2006

PLEASE DELIVER THE FOLLOWING PAGES:

TO: Deshawn
USPTO

FAX: (571) 270-9813

FROM: Janet L. Norris

Direct Dial: (614) 719-5955

TOTAL NUMBER OF PAGES, INCLUDING THIS COVER LETTER: 4

MESSAGE:

Deshawn,

Per our conversation, following please find the Revocation of POA and New POA, along with the stamped return receipt postcard, in U.S. Patent Application No. **09/989,783**. Please update the Agent to Customer No. 26,587. Thank you so much for your help.

Janet Norris

FAX NUMBER: (614) 469-4653

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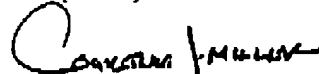
Re: U.S. Patent Application
Inventor: Thomas J. Boyle
For: Method and System for Testing Foam-Water Fire Protection Systems
Application No.: 09/989,783
Filed: November 20, 2001
Docket No. 24324-0001-111

Please acknowledge receipt of the following:

- Return receipt postcard
- Transmittal Form (PTO/SB/21) (one page)
- Revocation of Power of Attorney with New Power of Attorney and Change of Correspondence Address (PTO/SB/82) (one page)



Respectfully submitted,


Courtney J. Miller
Reg. No. 45,366

PTO/SB/21 (08-04)

Approved for use through 07/31/2008. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

2

Application Number 09/989,783

Filing Date November 20, 2001

First Named Inventor Thomas J. Boyle

Art Unit 3752

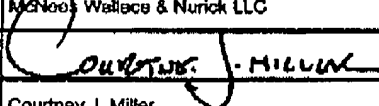
Examiner Name Davis D. Hwu

Attorney Docket Number 24324-0001-U1

ENCLOSURES (Check all that apply)

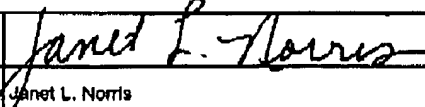
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
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<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input checked="" type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	McNeess Wallace & Nurick LLC		
Signature			
Printed name	Courtney J. Miller		
Date	January 17, 2006	Reg. No.	45,36

CERTIFICATE OF TRANSMISSION/MAILING

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Signature			
Typed or printed name	Janet L. Norris	Date	January 17, 2006

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614-339-7191

p. 2

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PTO/SB/02 (04-05)
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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	09/069,763
	Filing Date	November 20, 2001
	First Named Inventor	Thomas J. Boyle
	Art Unit	3752
	Examiner Name	David D. Hsu
	Attorney Docket Number	24324-0001-UH

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number: 26667

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with Customer Number: 26587

OR


<input type="checkbox"/> Firm or Individual Name			
Address			
City	State	Zip	
Country			
Telephone	Email		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/06)

SIGNATURE of Applicant or Assignee of Record

Signature			
Name	Thomas J. Boyle		
Date	1-16-06	Telephone	614-853-5400

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of _____ forms are submitted.

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